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27476 7590 02/13/2004

Chiron Corporation
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Esperanza C. Licad	(Depositor's name)
<i>[Signature]</i>	(Signature)
05/13/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/303,518	04/30/1999	VINCENZO SCARLATO	CHIR-0160 356.001	8470

TITLE OF INVENTION: NEISSERIAL ANTIGENS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	05/13/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ZHOU, SHUBO	1631	536-023100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Roberta L. Robins

2 Alisa A. Harbin

3 Robert P. Blackburn

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Chiron S.r.l.

Siena, Italy

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 8

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(Authorized Signature)

(Date)

Alisa A. Harbin

13 May 2004

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